ease which embodies the conditions mentioned; namely, a family of refinement and culture who desire the services of a trained nurse for about fifty or sixty dollars per month for their mother, an aged lady, not confined to her bed. On account of a slight shock she is left with an aphasia; she seldom knows or can tell when she wishes to urinate or go to stool, which renders the case a most disagreeable one, for, be as vigilant as possible, you cannot prevent accidents.

This of course would not be termed a hard ease, as we speak of them, where every bit of one's energy is brought into action to keep the patient alive, as well as the physical strength necessary to lift and move the patient about. This ease might be made endurable and even agreeable if the family would treat the nurse as a friend and member of the household, but in this ease, as so often occurs, as soon as you reduce your price there is a tendency to make you feel that your position is one more of a domestic order.

You can easily see how such treatment would affect a nurse coming herself from a refined family and as sensitive as those who employ her.

It seems to me when people of fairly comfortable means ask a nurse to reduce her regular price, they place themselves under an obligation to her, and the least they can do is to show her the deference due to any member of the family. When she demands twenty-one or twenty-five dollars, and declines to do anything except nurse in its strictest sense, and is a perfect autocrat, she is usually shown the respect due her position, but let her reduce her price, and she drops with a thud to the position of waiting maid.

S. E. B.

NURSING CONDITIONS IN THE SOUTH

Dear Editor: In reading the paper, "Nursing Conditions in the South," by Miss Wyche, one could not help but feel that she had a comprehensive grasp of the situation. She speaks of the lack of competent nurses to fill hospital positions. The flattering outlook for the private nurse will acount in part for this need; the fact that little attempt has as yet been made to prepare nurses for institutional work is also a factor; then, too, the demand for private duty nurses, at least in Louisiana and Mississippi, is usually greater than the supply; also the demand for nurses to fill hospital positions is greater than the supply of those who have been trained for such work. The salaries paid for institutional work in these two states are higher than salaries for corresponding positions north, east or west, yet we are handicapped first because most nurses here prefer private duty, and second, because the average indi-

vidual from the North still clings to that unreasonable fear of elimate. The summers are long, but one seldom hears of a heat prostration except from Chicago, St. Louis, &c. Miss Cabaniss makes the statement that "our system of training nurses is not over twelve years old in the South." I beg to correct her statement.

It was eighteen years ago that the New Orleans Sanitarium and Training School for Nurses was first organized against great opposition. It has had great vicissitudes and has come up through tremendous odds, always with the life of the training school in view. Its older nurses had hardships and inconveniences that would have daunted any of our present day nurses. Their first superintendent was a Louisiana woman who had gone North to graduate, their second was a Blockley graduate. In May they held their sixtcenth annual commencement.

Somewhat more than a year after this school was organized, the Charity Hospital of the same city, having a capacity of about a thousand beds, opened its doors for the training of nurses. Their first supervising nurse was from Bellevue. All these years there have been very few nurses from other states to swell the number in any way. It is true that the nurses in this particular section have thus far been so busy supplying the demand for private duty that neither efforts nor voices have been raised sufficiently to be heard afar off.

Yet a better understanding of the nursing conditions here and greater sympathy for the needs and aims of nurses in this section would do much toward helping forward the work which lies at our door to be done. The busy, strenuous life of the private nurse is not conducive to the study of far away conditions, but those who are looking for hospital work afield will find a harvest ready to be gathered.

People east of the Mississippi consider Texas a far country, just as those north of Mason and Dixon consider Louisiana and Mississippi yet in the swamp country; but I can assure you that Texans eonsider New York and Chicago a comparatively short run. In many things Texas leads; however, here too is a good field for our progressive, well-trained nurse who is willing to help blaze the trails.

You see how remote we have seemed from one another all these years that so well-informed and progressive a nurse as Miss Cabaniss should make the mistake of five or six years in her statement. At the next meeting of the Associated Alumnæ I trust that not only the Atlantie, the Pacific, and the Lake states will come in for representation and recognition, but that those from the Gulf will also be heard from.

L. MAY BUSHEY, Natehcz Hospital, Natchez, Mississippi.